Approval Request Form - GAIN Site Interviewer Training/Certification GAIN Local Trainer (LT)/Site Interviewer Trainee (*SIT) Match Request for Approval

To be completed by the Certified GAIN Local Trainer who will provide Quality Assurance (QA) Review and Written Critique Services

Training date:	Online Workshop (Yes) (No)
	s for QA: (Paper/Pen) GAIN ABS
	rtification:
If the Site Interviewer Trainee (SIT) i	administering the GAIN-I to <u>live clients</u> on GAIN ABS, his/her access permission ends at the 90-rtification is not yet complete. The Local Trainer (LT) may request an extension.
Completed GAIN Site Intervie	wer (SI) Workshop at College of Southern Idaho (CSI) Addiction Studies
<u>Program</u> : (Yes) (Vo)
LT Name/*Credential:	
Agency	
Phone:	E-mail:
SIT Name/*Credential:	
Agency	
Phone:	E-mail:
the time commitment expected to	that the above named persons and their supervisors have been informed of and agree to be successfully complete the GAIN Site Interviewer Certification process in accordance Welfare/Substance Use Disorder (DHW/SUD) and Chestnut Health System (CHS)
Local Trainer Signature/Date	
 Professional Trainee (QS CSI Addiction Studies Stuthe end of current semes 	ria: I Substance Use Disorder Professional (QSUDP) or Qualified Substance Use Disorder JDPT) working for a Business Psychology Associates (BPA) SUD Treatment Agency dents: Students must be prepared to test for Idaho Student of Addiction Studies (ISAS) at ter. Students must administer the GAIN Assessment using the paper and pen version must be CHS certified as a GAIN Local Trainer
Submit completed form via e-7305.	mail attachment to: <u>GAINTrainingAndAcces@dhw.idaho.gov</u> or fax to 208-332-
SUD Use Only	
Updated 3/3/15	